



Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

10064986

|   |   |   |                 |                                |                     |  |   | 11000 4780             |      |                            |                        |  |
|---|---|---|-----------------|--------------------------------|---------------------|--|---|------------------------|------|----------------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |                 |                                |                     |  | SMALL E                                 | NTITY                  | OR   | OTHER THAN OR SMALL ENTITY |                        |  |
| TOTAL CLAIMS  |   |   |                 |                                |                     | The company of the co | RATE                                    | FEE                    |      | RATE                       | FEE                    |  |
| FOR   |   |   | NUMBER FILED    |                                | NUMBER EXTRA        |  | BASIC FEE                               | 370.00                 | OR   | BASIC FEE                  | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS 20 minus  |   |   |                 |                                | s 20= *             |  |   |                        | OR   | X\$18=                     |                        |  |
| IND   | EPENDENT CL                                 | 3 mi                                      | nus 3 =         | * &                            | >                   | X42=   |   | OR                     | X84= |                            |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |                 |                                | ,                   |  | +140=                                   | ,                      | OR   | +280=                      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column  |   |   |                 |                                |                     | column 2   | TOTAL                                   |                        | OR   | TOTAL                      | 740                    |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |   |   |                 |                                |                     |  | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |      |                            |                        |  |
| ENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUMI<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA   | RATE                                    | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT   | Total                                       | *   | Minus           | **                             |                     | = 11   | X\$ 9=                                  |                        | OR   | X\$18=                     |                        |  |
| AME   | Independent                                 | *<br>NTATION OF M                         | Minus           | ***                            | CLAIM               | =  | X42=                                    | 2                      | OR   | X84=                       |                        |  |
| _   | FINOT PRESE                                 | INTATION OF MI                            | OLIPLE DEI      | ZEINDEINI                      | CLAIM               |  | +140=                                   |                        | OR   | +280=                      |                        |  |
|   |   |   |                 |                                |                     |  | TOTAL<br>ADDIT, FEE                     |                        | OR   | TOTAL<br>ADDIT. FEE        |                        |  |
|   |   | (Column 1)                                |                 | (Colur                         | nn 2)               | (Column 3)   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | )                      |      |                            |                        |  |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA   | RATE                                    | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total                                       | *   | Minus           | **                             |                     | =  | X\$ 9=                                  |                        | OR   | X\$18=                     |                        |  |
|   | Independent                                 | *   | Minus           | ***                            | CL AINA             | = -  | X42=                                    |                        | OR   | X84=                       |                        |  |
| <u> </u>  | FIRST PRESENTATION OF MU                    |   | LIPLE DEPENDENT |                                | CLAIM               |  | +140=                                   |                        | OR   | +280=                      |                        |  |
| ~   |   |   |                 |                                |                     | *  | TOTAL<br>ADDIT, FEE                     |                        | OR   | TOTAL<br>ADDIT. FEE        |                        |  |
|   |   | (Column 1)                                |                 | (Colur                         |                     | (Column 3)   |   |                        |      |                            |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY        | PRESENT<br>EXTRA   | RATE                                    | ADDI-<br>TIONAL<br>FEE | .0.  | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total                                       | *   | Minus           | **                             |                     | =  | X\$ 9=                                  | -                      | OR   | X\$18=                     |                        |  |
| AME   | Independent                                 | *   | Minus           | ***                            |                     |  | X42=                                    |                        | OR   | X84=                       |                        |  |
| با  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL |   | CLAIM           |                                |                     |  |   | +280=                  |      |                            |                        |  |
| *   | f the entry in colu                         | +140=                                     |                 | OR                             | +280=<br>TOTAL      |  |   |                        |      |                            |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                 |                                |                     |  |   |                        |      |                            |                        |  |